

## Socio-Economic Prospective of COVID-19 in Sudan: A Review

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Human health is a determinant factor for development. Any derivation for health has a negative social and the psychological impact on the individual, hence his economic performance and the performance of the society at large. Accordingly, COVID-19 as a pandemic disease has a disastrous impact on development. Like other countries, Sudan with a total area of about 1.88 millions km² [1] and estimated population at 43,849,260 [2] had been affected by this pandemic. March 13, 2020 was the time when covid-19 was first reported in Sudan [3]. Studies on the disease in the country paid more attention to socio-economic dimensions of the disease beside the biomedical aspects. For this review data were collected by consulting the internet databases using Google scholar engine. The articles published about COVID-19 in Sudan were searched. A total of 11 articles about the socio-economic prospective were collected; all of them were published during the period 2020 - 2021. The published work included research, commentary and review articles talked the issue of COVID-19 in Sudan from socio- economic prospective. These either investigated the general population to identify the knowledge, attitude and practice towards COVID-19, study the psychological effect of the disease targeting especial population segment or considering the economic aspect of the disease.

Online cross sectional surveys on the knowledge, attitude and practice towards COVID-19 were done by [4-6] the former study [4] revealed that males, children, marital status, low education, free workers, and residence of outside Khartoum were related to lower knowledge score. While next study [5] revealed that the majority of the population investigated was university and higher education level, residing in Khartoum. This study revealed that;; in practice the good knowledge of investigated population and their positive attitude towards the control of the disease were not applied effectively. In the third study [6] a sample survey targeting Sudanese residence was carried out. The result was that the investigated population hasn't a good knowledge about the disease and their behavior in controlling it is not satisfactory. However, women and young people have a good knowledge and react positively towards COVID-19 compared to others. Thus, from these studies we can conclude that higher education and urbanization associated with good knowledge and satisfactory attitude towards COVID-19 but poor practice to avoid it.

What are the factors behind the adherence of the study population to COVID-19 preventive measures? this was the interest of the work conducted by [7]. The result was that; females, those who usually care about themselves and those who aware about the danger of the disease were more like to implement the protective measures against COVID-19.

Targeting university students [8] assessed the anxiety levels as a result of the emergence of covid 19 pandemic using Beck Anxiety Inventory. Less than 10% of the students experienced high anxiety, the rest are either have low or moderate degree of anxiety. Another psychological study was conducted by [9] to investigate the impact of the disease on those who work in close contact with the infected persons in Khartoum state, Sudan. The majority of the study population experienced depression with restlessness; these signs depend on the personal characters and working conditions.

Psychological impact of covid 19 in Sudan was addressed by [3] after the cases of the disease reached the community transmission stage and positive cases confirmed, the mortality rate rose and Sudan entered into quarantine experience. This situation adversely affected the general population; fear coupled by restlessness from been infected by the disease, the stigma as a result of being infected are the most serious factors affecting people. Others include xenophobia and confusion. To overcome these negative psychological impacts, the authors advocated mental examination and care for the positive confirmed COVID-19 patients together with those subjected to infection and all in contact people like patient's family members and forefront healthcare practitioners. Instead of providing negative message through mass media, positive message that support mitigating measures should be disseminated. Beneficial information about the possible psychological effects and how to deal with them were other ways recommended by the authors.

The issue of the Psychological impact on doctors during covid 19 pandemic was raised by [11]. Many factors act to adversely impact the psychology of the doctors, the feeling of being infected themselves, the fear from being a source of infection to their families and healthy people and the fear of being socially isolated, all of these make them discomfort and depressed. On the other hand; dealing with critically sick about to pass patients aggravates their bad feelings. To mitigate this negative impact on the doctors they are in need to be psychologically supported.

From economic point of view [12] conceived that the adverse economic condition, privatization, inappropriate pricing policy, together with poor pharmaceutical manufacturing and weak regulatory system were the core elements that stem behind drug and medicine shortages which threaten patient health. Usually, the unfavorable economic situations act to adversely affect the disease control efforts, how Sudanese act to control covid19. This was the concern of [10]. In such situation like that in Sudan, the management of health sector needs collaborative effort from all parties involved: the state, community and the individuals. Accordingly, the authors advocate adoption of health care by people approach; non medical volunteers have a rival role in this case.

The inter-sectionality of healthcare and economy was described by [13]. Due to the current economic, social, and structural challenges, they suggested potential solutions to prevent the second peak of COVID-19 in Sudan. The disease response plan should include data collected from the first peak. The community organizations should contribute effectively in all stages of the disease management. These include the awareness, control and mitigation stages.

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